31st Annual Meeting
Preliminary Agenda
(as of August 11, 2014)

Saturday, September 13

9:30AM-5:00PM  Board of Directors Meeting (Board of Directors and Invited Guests)
Noon-5:00PM    Registration Desk
Noon-5:00PM    Exhibitor Set-up

Sunday, September 14

7:00AM-5:00PM  Registration Desk
7:30AM-8:30AM  Continental Breakfast with Exhibitors
7:30AM-5:00PM  Exhibits
8:30AM-8:45AM  Opening/Welcome
               Program Committee Co-Chairs
               Jan Dragotta, SROA President
               Teena Adkins, SROA President-Elect

8:45AM-9:45AM  #001 Keynote Address: Learning from Disney -- Going From Good to Great in Patient Perceptions
Speaker: Fred Lee
Author, If Disney Ran Your Hospital: 9½ Things You Would Do Differently

Fred Lee has the enviable distinction of having been both a senior vice president of a major medical center and a cast member at Disney University. Disney recruited him because of his expertise in helping hospitals achieve a culture that inspires patient and employee loyalty. At Disney he helped develop and facilitate Disney’s healthcare version of its 3-day seminar, Disney’s Approach to Quality Service, and its newest seminar on customer loyalty. Using an insider’s experience and a keen eye for cultural comparisons, he authored the healthcare best seller, If Disney Ran Your Hospital: 9½ Things You Would Do Differently, which was awarded the 2005 Book of the Year from the American College of Healthcare Executives. He now shares his insights with healthcare groups all over the country.

Fred Lee is a nationally recognized expert and consultant in patient relations and service excellence. His seminars are dynamic, inspiring, and immensely practical. He motivates healthcare managers as well as front line staff by talking their language and having walked in their shoes. He can also lead an organization through a comprehensive cultural change based on the Baldrige Award criteria that builds patient loyalty through dedication to exceptional service, continuous improvement, and effective feedback systems.

Lee began his healthcare career at Shawnee Mission Medical Center in Shawnee Mission, Kansas, a suburb of Kansas City. During his five years as vice president for marketing and development, he won several national awards for innovative approaches to patient satisfaction and loyalty. He was then recruited to be senior
vice president at Florida Hospital (now over 1500 beds), where he developed a nationally acclaimed guest relations program for hospitals. As Lee’s reputation in the industry grew, and other hospitals sought out his expertise in developing their own strategies, he left Florida Hospital and formed his own healthcare marketing and service excellence company, which has provided consulting or training services to nearly 100 hospitals. Highlights of his subsequent career include:

- Joined Dick Ireland in the Snowmass Institute to teach a 40-hour course in Healthcare Communications that was the leading source of education for healthcare communicators in the 1980’s.
- Authored a handbook for healthcare service line management, which was purchased and used in over 300 hospitals.
- Asked by the American Management Association’s Healthcare Division to develop and teach their first certificate course for healthcare managers in service line marketing.
- Invited by Disney University to help develop and facilitate a health-care version of the 4-day seminar, Disney’s Approach to Quality Service, and their most recent seminar, Customer Loyalty.
- Became a trained facilitator for the Baldrige Award self-assessment process.
- Selected by Pfizer as part of a special faculty to teach Older Adult Sensitivity Workshops for healthcare organizations.

9:45AM-10:15AM  Breaks/Exhibits

10:15AM-11:15AM  Concurrent Workshops

#002 Nonphysician Practitioners in Radiation Oncology
Speaker: Cindy C. Parman, CPC, CPC-H, RCC

This session will include common definitions of nonphysician practitioners (NPP), services typically provided by these individuals, and current utilization in the radiation oncology practice.

The Centers for Medicare & Medicaid Services (CMS) has published numerous documents regarding the use of NPPs in an “incident to” capacity, and the Office of the Inspector General (OIG) continues to target “incident to” billing for review. As a result, it is essential that nonphysician services be reported as “incident to” only when all criteria are met!

Last, it is important to remember that “incident to” is a Medicare convention only, and other payors may or may not subscribe to this billing methodology. This session will also discuss information gathered from key commercial and managed care insurers that indicate the official position of these healthcare payors on nonphysician practitioners, and their acceptance or rejection of the Medicare “incident to” definition.

#003 Patient Safety in Radiation Oncology
Speaker: Debbie B. Gilley, MPA

The objectives of this presentation are to increase the participants awareness of the issues with patient safety in radiation oncology and provide information on AAPM resources to help medical physicists identify potential safety weakness and improve overall patient safety in radiation oncology. At the conclusion, participants will be able to understand safety culture, the need for performing a patient safety assessment and the need to collect and evaluate errors and near misses within their facilities, ultimately to improve patient safety through learning.
#004 Comparison of Clinical Treatment Modalities in Radiation Oncology
Speakers: Barby Pickett, MS, MBA, and Robin Stern, PhD

Understanding available technologies and the availability of the associated treatment machines in a modern radiation therapy clinic can be confusing and even overwhelming. We will present a comparison of modalities for the external-beam treatment of selected clinical sites including: Stereotactic Body Radiation Therapy (SBRT) using helical and robotic delivery, volumetric modulated arc therapy (VMAT), intensity modulated radiotherapy (IMRT) and three-dimensional conformal radiotherapy (3DCRT) for lung treatment; multiple advanced modalities for prostate treatment; Gamma Knife, CyberKnife, VMAT, IMRT, and 3DCRT for brain cancers; and helical and 3DCRT techniques for cranial spinal treatments. We will compare implanted radioisotopes and high-dose-rate brachytherapy techniques for the treatment of prostate cancer and we will discuss the benefits of electronic tools used to aid in evaluation and comparison of treatment plans, real-time imaging used to increase the consistency and quality of these techniques, methods for accurately delivering dose and, most importantly, improving patient safety.

#005 Why Six Sigma and HCAHPS Do Not Measure Greatness
Speaker: Fred Lee

Part 2 of Fred Lee’s Keynote address: Using compelling evidence, this session will zero in on hospital best practice blind spots in our current metrics for clinical quality, readmissions, treatment compliance, length of stay, risk management, and patient perceptions.

11:15AM-11:45AM Breaks/Exhibits
11:45AM-1:15PM Annual Business Lunch
1:15PM-2:15PM Concurrent Workshops

#006 The Standardization of Electronic Documentation System Wide
Speakers: Adam Brown, BSRT(T), CMD, and Scott Plemmons, R.T.(R)(T)

This session is designed to educate attendees on the Electronic Medical Record while standardizing documentation system wide.

This session is designed to educate attendees on the evolution of the Electronic Medical Record while emphasizing the benefits and pitfalls of standardizing documentation system wide. We will discuss the importance of ensuring that each document is patient specific and designed for each individual patient while maintaining a standardized format. We will also identify current reimbursement issues being addressed due to cloned documentation. Lastly, we will discuss the resources available on the Medicare website, which will aid with these documentation issues.

#007 How to Achieve Success in Challenging Times Revenue Circle Best Practices
Speakers: Jeff Buckman, MBA, Brenda Marie Palo, CCS-P, ROCC, Gary Webster, MPH, and Kelli Weiss, R.T.(R)(T), on behalf of the SROA Reimbursement & Economics Committee

The challenges affecting radiation oncology administrators in the revenue continuum continue to grow. In late 2012, a survey was distributed by the Reimbursement and Economics Committee to the membership of SROA to gather data on the landscape of current administrative practices. The goal is to identify best practice models and to share them as a SROA membership resource. This
year we continue our presentation theme on the Revenue Circle Continuum and focus on three additional key areas of interest.

Medical Necessity: The establishment of medical necessity has been a key area of focus by insurance payors and Radiation Oncology Benefit Managers (ROBM).

Documentation Compliance: Maintaining documentation compliance within the electronic medical record has been a key focus for many moving towards a paperless environment.

Chart Audits: The role of continual chart audits is the final piece of our presentation. Determining the ongoing review of medical documentation and charge capture as it relates to documentation compliance indicates the ongoing need for chart reviews and audits that take place internally; to minimize ongoing payor denials.

#008 Productivity in Radiation Oncology - A Meaningful Model
Speaker: Vicki Reich, Tomain Murphy, MBA R.T.(T), and Donna Royster, RTT MHA

Radiation Oncology administrators are tasked with establishing, measuring and maintaining staff requirements for safe operations in clinical radiation therapy. Minimum staffing requirements are set by national safety standards as recommended by radiation oncology professional organizations, giving consideration to complex, time-consuming procedures. Productivity for hospital outpatient departments is often measured using an inpatient methodology that has been adapted for outpatient work. Criteria for productivity reporting are inconsistent with safety standards and financial reporting. The bundling of radiation therapy procedures, coupled with a plethora of correct coding edits, has resulted in unbillable productive hours and, consequently, inaccurate hospital reporting.

Given current scrutiny of labor management, administrators face the challenge of unsafely reducing staff based on negative productivity variances. Clinical and financial stakeholders can work collaboratively to establish an alternative productivity methodology that supports safe, quality radiation oncology care, and produces meaningful financial reporting.

#009 Overview of Accreditation Programs in Radiation Oncology
Speakers: Christopher Pope, MD (ACR), Audrey Hyde, BS HCA, RTT (ACRO), and Angela C. Nicholas DC, MBA (ASTRO)

Three accreditation bodies perform or are creating practice review programs specific for radiation oncology: ACR, ACRO, and ASTRO. The history and process/procedures for accreditation of these three organizations will be presented. In addition, this session presents the state activities for requiring radiation oncology accreditation.

2:15PM-2:45PM Breaks/Exhibits
2:45PM-3:45PM Concurrent Workshops

#010 RO ILS - Radiation Oncology Incident Learning System
Speakers: Kathy Lash, BS, RT(R)(T) and Tom Piotrowski, RN, MSN, CSSGB

As a growing concern regarding patient safety, the Patient Safety and Quality Improvement Act of 2005 was created and signed into law. This statute allowed for the creation of Patient Safety Organizations. PSOs are designed to assist and encourage the expansion of voluntary reporting of patient safety information whereby providers can develop initiatives to improve the quality and safety of
healthcare; to promote learning about the underlying causes of risks and harms in the delivery of health care; and to share those findings widely.

ASTRO, along with the AAPM, identified a need to form a PSO and began discussion with Clarity PSO. Data elements were determined through research and collaboration among Radiation Oncology professionals. Beta test sites have begun to enter data in a national Radiation Oncology-specific PSO. Clarity PSO, ASTRO and AAPM constructed a Radiation Oncology Healthcare Advisory Council (RO-HAC) to study the data and report root causes and trends.

#011 Strategic Planning for Collaborations: Creating a Community Network

Speaker: Kay Harse, RN, MS, AOCN and Jennifer Kellogg

As the health care landscape continues to change, it is imperative to leverage existing resources to provide the most comprehensive cancer care to a large, socio-economic, diverse population. In order to maximize any potential partnerships within the community with diminished conflicts, a review of all key areas of the current practice must be completed to determine if collaboration with another entity is value added.

Smaller institutions and free-standing centers must evaluate their overall education, research, clinical missions, and evaluate their deficiencies to determine potential threats from competitors and how joining may or may not affect overall patient satisfaction. Conversely, an institution interested in providing services to individual entities must be able and willing to offer flexibility within the model, with options for varying levels of participation, including services such as: physician/physics assistance; internal/external locum support; quality assurance; medical direction; clinical and administrative mentoring; billing and compliance; clinical research coordination; best practices; auditing; name recognition; technical support; equipment, hardware and software assistance; and financial analysis.

Collectively, both parties must join to review their mutual strategy on key items: 1) Review all services for potential collaborative opportunities based on practice gaps, competition, political ramifications and community desires; 2) Review payer mix and future state of cancer care patterns for volume and reimbursement projections; and 3) Review needs for infrastructure, communication, and contractual controls to ensure all parties can acknowledge the benefits as well as challenges of integration.

By reviewing the options of collaboration as either a small or large organization, organizations can create an overall practice perspective to determine if joining another practice, and to what extent, could benefit the overall practice.

#012 Technology and Its Importance in Radiation Oncology

Speakers: Ryan Houston and Pamela Akazawa

The delivery of radiation treatments with most devices today requires the data to be electronically transferred to control the parameters of the machine. Due to this, most control areas are packed with computers. Each computer may have a single task while others may have multiple jobs to perform. All of the computers need to be able to communicate with each other as well as with the treatment planning computers, the QA tools, databases, imaging devices, and the hospital information systems. The physicists and radiation oncology IT staff work closely to ensure the accuracy of these systems for patient safety.

While treatments involve the most IT intensive requirements, there are other areas of the department that have duties such as scheduling, billing and archiving that are significant to the entire radiation oncology process. The IT group plays an important role since they interact with each member of the department and have to understand the users role so their system configurations are setup for efficiency
and stability. The Radiation Oncology departments at the University of California, San Francisco and University of California, Davis have a variety of treatment delivery options, treatment planning systems, an electronic medical record, multiple imaging devices, QA tools, databases and backup systems. This myriad of systems and system architecture requires constant care and maintenance to safeguard against downtime and provide premium support.

#013 LDR, HDR, EBRT; The Alphabet Soup of Brachytherapy Code Capture and Compliance

Speaker: Susan Vannoni, MS, BS, RT

There are many players on the team when brachytherapy procedures are performed including, but not limited to, physicians, surgeons, urologists, physicists, dosimetrists, therapists and nurses. Each player should understand who is responsible for capturing the codes, and who is responsible for the documentation and what documentation is required for code capture.

The first question one should ask is what type of brachytherapy will be performed. Is it going to be a case employing Low Dose Rate (LDR), High Dose Rate (HDR) or with Electronic Brachytherapy (EB)? Will the radiation source be placed permanently, or temporarily? How will the source of radiation be placed? Interstitially? Intercavitary? Through an applicator? Through a catheter? What is a billable event? What should be captured?

Brachytherapy charge capture and compliance is not an easy task. There are many types of brachytherapy and administrators should understand the definitions of each type of brachytherapy, who captures the codes, what documentation is needed and why the codes should be captured.

It is the objective of this session to educate on the many facets of brachytherapy. Who, when, why, and how various aspects of the procedures are documented and who should capture the codes for reimbursement and timely filing of the events associated with the actions.

3:45PM-4:15PM Breaks/Exhibits

4:15PM-5:15PM #014 Self-management – What to Do When Not in Direct Care

Speaker: Kate Lorig, RN, DrPh

Stanford University

Kate Lorig is a Professor at the Stanford University School of Medicine, and Director of the Stanford Patient Education Research Center. She has a masters in nursing and a doctorate in public health with a specialty in health education.

For more than two decades, using a public health approach, Dr. Lorig has developed and evaluated community-based patient education programs in English and Spanish for people with chronic conditions including arthritis, heart disease, lung disease, diabetes and AIDS. In recent years this work has been extended to similar programs offered via the Internet.

Her present research includes the development and evaluation of programs for cancer survivors and as well as for caregivers of people with PTSD, traumatic brain injury and other cognitive impairments. These programs are offered largely over the Internet. Most recently she has been involved in studying how to translate programs from the academic setting to the larger community.

5:15PM-6:15PM Welcome Reception & Vendor Wine Tasting

6:00PM-6:45PM New Member Reception (By Invitation Only)
Monday, September 15

7:00AM-Noon  Registration Desk
7:30AM-8:30AM  Continental Breakfast with Exhibitors
7:30AM-Noon  Exhibits
8:30AM-9:30AM  #015 Safety and Quality Assurance in Radiation Oncology
                  Speaker: Shannon Fogh, MD
                  University of California – San Francisco

Dr. Shannon Fogh is a radiation oncologist who specializes in the treatment of
CNS and pediatric malignancies. She specializes in the use of Gamma Knife,
Cyberknife, intensity-modulated radiotherapy (IMRT), and total body irradiation
(TBI) to treat a variety of malignant and benign conditions. Dr. Fogh’s research
interests are centered on development of emerging radiotherapeutic and biologic
techniques in CNS and pediatric tumors aimed at reducing the toxicities of
treatment resulting in improved quality of life and preservation of neurocognitive
function for her patients. She is also interested in the development of interventions
to treat side effects associated with radiation treatment and is the co-chair of a
national study, RTOG 1012, examining the efficacy of Manuka honey in
preventing esophagitis. As the Medical Director of the Radiation Oncology
Quality and Safety Programs, Dr. Fogh leads and directs the quality assurance,
quality improvement and patient safety programs in the Department of Radiation
Oncology. She is dedicated to implementing opportunities for quality
improvement and other projects aimed at delivering effective, safe and efficient
patient care.

9:30AM-10:00AM  Breaks/Exhibits

10:00AM-11:00AM  #016 Managing Legal Liability in Radiation Oncology
                  Speaker: Tom Mulroy
                  Hinshaw and Culbertson LLP

Mr. Mulroy is a trial lawyer and an expert in the defense of lawsuits alleging
radiation treatment errors. He has been named lead defense counsel in radiation
treatment cases throughout the country, including Illinois, Washington, Texas,
and Ohio. He also served as one of the lead defense attorneys in an Illinois

An assessment of radiation oncology equipment and practices appeared in the
December 28, 2010 issue of the New York Times. The article, written by
journalist Walt Bogdanich, described treatment errors taking place during several
radiosurgery procedures at a hospital in Illinois. As lead defense attorney in the
subsequent lawsuits arising of the incidents described in the article, Mr. Mulroy
conducted an extensive investigation into the facts of those cases. Mr. Mulroy will
use the lessons learned from the New York Times incidents, and others, to help
you ensure your facility and staff are following best practices in preventing and
managing legal liability issues.

11:00AM-12:00PM  Committee Meetings (Open to All Members)
                  Advocacy
                  Benchmarking & Best Practices
                  Communications
                  Membership
                  Reimbursement & Economics
                  2015 Planning Committee (By Invitation Only)
Tuesday, September 16

7:00AM-5:00PM  Registration Desk
7:30AM-8:30AM  Continental Breakfast with Exhibitors
7:30AM-4:00PM  Exhibits
8:30AM-9:30AM  #017 The Focused Leader: Managing More Effectively in a Distracted Culture
Speaker: Pamela J. Vaccaro, MA, CSP
Designs on Time

Pam's passion for speaking and time management began in the 1980's. She launched her company, Designs on Time, in 1991 and has been sharing her solutions for the changing situation of managing time and organization to hundreds of clients from varied industries ever since! Her expertise is solid and her interest in assisting your group is authentic.

Pam Vacarro is a seasoned speaker, trainer, author and consultant. Her award-winning presentations have been heard by audiences across North America and Mexico. Pam has earned distinction among her colleagues as one of only 177 women in the international speaking community to earn the National Speakers Association's highest designation for Certified Speaking Professionals.

9:30AM-10:00AM  Breaks/Exhibits
10:00AM-11:00AM  Concurrent Workshops

#018 Do We Need a Compliance Plan?
Speaker: Deborah Churchill, RTT

Whether you are a freestanding center or a department in a hospital, every radiation oncology 'center' should have a written Compliance Plan because we are all committed to high standards (best doctor practices) and doing business with integrity. A comprehensive Compliance Plan is a deliberate step in ensuring that everyone in your organization conducts themselves in an ethical manner based on internal guidelines.

Learn what elements should be in your Compliance Plan to make it a multifaceted multipurpose document that can be used to demonstrate policies and support claims. Your Compliance Plan should include all documentation requirements for performing and supported each service, indicating each step of the process, the documentation, and finally the coding that will be reported.

If designed correctly, this document can be used for staff education to providing a roadmap of the documentation required to support a claim. This seminar will provide a roadmap in developing this important document.

#019 Implementing an EMR: A Roadmap to Success
Speakers: Robert Ghafar, BSc, RT(T), ARRT, and Kimberly Smith, MHA

Mount Sinai Radiation Oncology has an advanced, fully automated, checklist driven EMR, which is integrated through numerous interfaces with the hospital EHR. The goal of moving to a paper-free, transparent EMR was an intricate process that required thought, preparation, resources, knowledge and funding.

Contract negotiations are critical and necessitate an understanding of all requirements such as: technical needs (hardware/software/licensing/interfaces), training, consultants, and service contracts. The success of the EMR project was heavily invested in the carefully selected implementation team, consisting of leaders from medicine, billing, administration, nursing, physics, therapy and IT. The team was responsible for evaluating, developing and testing processes. It was
responsible for training staff which posed individual challenges but with consistent communication, this was accomplished successfully.

Electronic medical records have demonstrated significantly improved efficiency in many areas of Radiation Oncology workflow. The team spent an extraordinary amount of time, looking for opportunities to find lean, efficient ways to apply the new EMR’s capabilities to every pre-existing workflow. This process was iterative and became known as the roadmap to success.

#020 Radiation Oncology: What I Need to Know Concerning Charge Capture, Supervision and Appropriate Documentation
Speaker: James E. Hugh, III, MHA, CHBME

Administrators and clinical staff have to perform at a higher level sin a very dynamic healthcare environment today. Technology changes over the past several years, with the advent of increasing government interference in healthcare issues, have forced the average hospital, freestanding and physician to change or retire. In the wake of declining reimbursement and scrutiny, Administrations have increased their expectations of the clinical staff to keep the best while still justifying the costs. Hard decisions have to be made and have resulted in reduced staffing at many radiation centers.

The modern administrator will have to understand the clinical aspects, regulatory, financial and reimbursement issues to succeed. Long gone are the days of just treating patients and understanding a small component of the entire process. We, as administrators, have to know how our EHR works, budgets, interaction with patient finance, patient registration and authorizations and patient care. What type of documentation is important? What are the supervision rules to assist our clinical staff and physicians? What are the procedures and how do we report them to the third party payors in order to receive appropriate reimbursement and support medical necessity? How do I document to communicate to my team members what has been performed and also satisfy the billing requirements to a myriad of payors?

Staying current in an effort to intersect the clinical rigors with the regulatory burdens is today’s challenge for the modern administrator and staff and this presentation will provide some reliable tips and tools to assist.

#021 Nine Steps to a More Organized Workspace
Speaker: Pamela J. Vaccaro, MA, CSP

Pam will describe her nine step process. This simple concept she has demonstrated in her programs or used with private clients for an efficient and effective workspace, has proven to work whether your office is highly electronic-based or not. She encourages participants to compare their workspace systems with her Nine Steps. This session also allows for shared best practices with other clinic managers.

11:00AM-11:15AM Break/Exhibits

11:15AM-12:15PM #022 Family Survivorship Medicine: Along the Front Lines
Speakers: Curt Pesmen and Paula DuPre’ Pesmen

Curt Pesmen, author of seven books of nonfiction, is the founding editor of LiveStrong magazine and LiveStrongMagazine.com, of Austin, TX. Curt has written for Esquire, GQ, US, Glamour, Money and Outside, as well as for The New York Times and CNNMoney.com. While at Esquire, he wrote the best-selling book, How a Man Ages, based on a cover story, and promoted it via appearances on CNN, NBC Today, NPR and on the Oprah Winfrey show. More
recently, he authored My Cancer Year and served as associate producer on the 2014 documentary, Keep On Keepin’ On.

Paula DuPre’ Pesmen worked for more than 15 years as an associate producer for filmmaker Chris Columbus and 1492 Pictures. During that time she served on: Mrs. Doubtfire; Home Alone 2; Rent; Harry Potter and the Sorcerer’s Stone; Harry Potter and the Chamber of Secrets; and Stepmom. More recently, she served as producer on the documentary films: The Cove (Academy-Award winner); Chasing Ice (Academy Award-nominated) and Keep On Keepin’ On (Tribeca & Seattle Film Festival Award-Winner). She is also Executive Director of There With Care, a nonprofit she founded in 2005 with the mission of serving families and children facing critical illness.

12:15PM-12:45PM Break/Exhibits

12:45PM-2:30PM Quality Luncheon
Entertainment: Red Panda Chinese Acrobats and Leung’s White Crane

2:30PM-3:30PM Concurrent Workshops

#023 Clinical Trials: The Coding Conundrum
Speaker: Cindy C. Parman, CPC, CPC-H, RCC

Two modifiers, one diagnosis code and a requirement to supply the clinical trial number make coding services associated with clinical trials a challenge for some providers of service. Every healthcare provider and organization that provides care for a patient enrolled in a clinical trial must ensure that the extra steps required for correct billing occur in order to ensure appropriate reimbursement.

In addition, insurers are sometimes required to reimburse for routine services, but some payors may not have to pay for anything related to a clinical trial. The Affordable Care Act has impacted trial reimbursement, but the extent of payment may still be in question.

This session will review definitions of routine and investigational services, explore public audits and investigations involving clinical trials and provide examples of correct and incorrect modifier and diagnosis code reporting. The best audit defense comes from knowing the clinical trial guidelines, following payor requirements and ensuring that medical record documentation is defensible in all reimbursement situations.

#024 MRI-Guided Radiation Therapy
Speaker: Angel D. Medina

The importance and value of photon –based image-guided radiation therapy has been demonstrated and documented numerous times over the past decade. While offering the clinician an extremely valuable tool, the current systems have their limitations. MRI guided radiation therapy is a newly developed technology that may allow us to overcome a few of those challenges and shift the treatment paradigm by allowing the clinician to access real-time intra-fractional images of the patient.

With the first unit of its kind at Washington University and Barnes-Jewish Hospital, the presentation will facilitate an introduction of the technology, a discussion of its treatment planning and delivery capabilities and a look at its future potential.
#025 Throughput Modeling in Radiation Oncology  
**Speakers: Michael Peters, MBA R.T (R)(T)**

This presentation “Throughput Modeling in Radiation Oncology” is designed to highlight how the Radiation Therapy administrator can seek analytic solutions to provide quality patient care, reduce patient wait times, increase physician and staff productivity, reduce operational cost, and basically do more with less. The basis for this presentation is the research completed within the UK and Canada.

Cancer care providers are struggling in tough economies to deliver care more efficiently; with higher productivity and throughput; while increasing patient quality and standardization; in an effort to meet the demand of reducing the overall cost of providing healthcare.

In response to the demands of patients and their advocates for better and timelier cancer care, the NHS in the UK, developed R-PORT as an oncology-specific capacity planning and management software tool. The R-PORT software has been utilized extensively within the UK, and now with the acquisition of this software, Varian Medical Systems has begun offering this service within North America.

The software has been found useful in reducing the impact on patient waiting times through its simulation and resource scenario planning; support of additional staffing resources; asset management, utilization procurement; standardization of processes and reduction of planning timeframes. By providing this modeling in a safe test environment, the impact of change can be fully evaluated with minimal service disruption.

#026 Building a Culture of Safety: Learning from Our Mistakes  
**Speakers: James Sinicki, MBA, and Kelly Marcinko-Smith B.S. R.T.(R)(T)**

The drive to develop a national reporting database for events and near misses in Radiation Oncology has challenged our specialty to confront risks of errors in a meaningful way. What deviations from treatment should be reported? What should be done with this information? How do we prevent future recurrence of these errors? In this presentation, we will explore the processes that we use at the UPMC CancerCenter to report events and near misses and how we use this information to educate staff in order to prevent future deviations.

**Objectives:**
We will discuss the critical elements to be collected and the mechanics and timetable of collection when an event or near miss occurs. We will also walk through the process that is used at the UPMC CancerCenter to evaluate these incidents and ways that we work to prevent such deviations in the future. There will be a discussion of what managers can do to facilitate this process and improve the safety within their own departments. Lastly, we will review a few examples of events and how we approached obtaining and implementing corrective measures. Upon completion, the attendees will leave with ideas of how to heighten their organizations’ focus on events and near misses, thereby fostering a culture of safety.

### Schedule

**3:30PM-4:00PM**  
Break/Exhibits/ Vendor Drawing - **must be present to win!**

**4:00PM-5:00PM**  
Concurrent Workshops

### Pacific JK

#027 Results of the Inaugural National Hospital Oncology Benchmark Study  
**Speakers: Teri Guidi, MBA, FAAMA, and Matt Sherer, MBA, MSHA**

In this first-ever study of hospital outpatient radiation centers, many of whom are SROA members, data was collected and analyzed in order to provide comparative data points on the most frequently requested issues for operating a radiation center. We will show a variety of benchmarks for departments of various sizes across the PACIFIC, DE, and JK regions.
country, these benchmarks will include staffing per patient and per linear accelerator, quantity of treatment encounters per patient and for major disease sites, and IMRT mix.

#028 Providing the Ideal Patient Experience in Radiation Oncology
Speakers: Martha L. Mychkovsky B.S.R.T.(T) and Deborah L. Malush RT(T)

The purpose of this course is to provide participants with information and tools to enhance the patient experience in their radiation oncology setting. The guests will gain knowledge about measuring patient satisfaction along with specific departmental project ideas to increase patient satisfaction scores. This session will touch on future models of care relating to patient engagement and how we can prepare and adapt to these new models. Attendees will leave with ideas and tools to help them implement changes that can increase patient satisfaction in radiation oncology.

#029 Radiation Oncology Coding/Documentation/Compliance and Reimbursement 2014 and Proposed for 2015
Speaker: Ron DiGiacoimo, MBA

This program is designed to update and educate the Administrator, Radiation Therapist, dosimetrist and other clinicians to the art of coding and compliance within Medicare guidelines. In addition, coding combinations for items such as simulations, IMRT, SBRT, and Brachytherapy will be covered. We will cover typical scenarios for 2014 and review proposed changes for 2015. We will leave time for questions and answers.

#030 Improving Patient Care and Outcomes Management with Better Information Technology
Speaker: David Ackerson

The intent of my presentation would be to provide the audience with the ability to assess available technologies for use in their clinics. Much of the way solutions are provided for clinics and clinicians are changing rapidly, and affective use of new tools could improve data flow, improve clinician access, affect clinician decision making positively, and standardize methods of care, to improve outcomes. Further, using new data management technologies, one could easily see trends in their care models, quickly identify strengths and deficits, and adapt as required to ensure quality care, and effective use of care resources. Finally, the hope would be from understanding the logic that was illustrated to evaluate the tools above; the audience could apply those models to coming technologies, and determine which would be of value, and those which may be less effective. Time would be allotted in the end, to allow for clarification of any points discussed, allowing for all to leave with a solid understanding of objectives covered, and the tools to make intelligent decisions for the coming year.

5:00PM – 5:30PM  Sponsor Wrap Up Meeting (By Invitation Only)
5:00PM – 7:00PM  Early Exhibitor Breakdown
7:30PM-11:30PM  President’s Party at the Bently Reserve
Live Entertainment: PopFiction
*** Attendees must RSVP at time of registration. A limited number of tickets will be available onsite.
Wednesday, September 17

7:00AM-Noon  Registration Desk
7:30AM-8:30AM  Continental Breakfast with Exhibitors
7:30AM-Noon  Exhibits
8:30AM-9:30AM  Concurrent Workshops

#031 Simulation in 2014
Speaker: Deborah I. Churchill, RTT

In radiation oncology, an initial simulation procedure is performed for external beam radiation therapy (EBRT) to prepare the patient for treatment and/or isodose planning. Effective January 1, 2014, the code descriptions for the simulation procedures have changed.

This session will discuss what constitutes a simulation, which services are bundled in the primary procedure, what supervision is required, and how all components of the simulation procedure are documented.

During a treatment course, additional simulations may be required. Discussion will include block verification simulations, IMRT confirmation simulations, and boost simulations.

There are also times when a patient's anatomy changes that requires a repeat CT data acquisition for isodose planning during a course. Discussion will include two scenarios when this occurs; outlining the difference between a CT data acquisition without the requirement of personal physician supervision and a repeat simulation that does require the personal participation of the physician.

#032 Leading During Times of Change
Speakers: Monica Fullenkamp MS, R.T.(R)(T) and Julie Sussi R.T.(T), BA, MA

Change can be hard for people, so making it as organized as possible can help with the implementation. In particular, changing a linac or opening a new facility takes a lot of planning to ensure that everything goes smoothly. Without proper planning, the startup can be chaotic and cause anxiety for both staff and the patients.

This session will discuss one university's experience with operationalizing a new department that is nearly three times larger than the existing space. We will discuss the following: the length of the planning process, how to determine the number of new staff needed for the new space, the most efficient patient flow model to use in the new space, and the how to transition the patients and staff. We will also discuss how to determine the right people are involved in the decision making process, and ensuring staff is informed and engaged throughout the process.

#033 Safety Culture through Continuous Reporting and Analysis
Speaker: Kathryn Betcher, RT(T)

An organization’s “safety culture” and approach to errors and events are recognized across industries as key factors influencing safety and quality. This presentation summarizes experiences, insights, and lessons learned three years after developing and implementing a comprehensive incident learning program in a large, multi-site (academic and community) Radiation Oncology department.
A “Condition Reporting” program was developed with key attributes: 1) full staff participation, 2) four carefully defined incident severity levels covering a broad range from significant harm to minor process delays, 3) specific requirements for analysis and response for each severity level, 4) formal processes for review and oversight, and 5) web-based information system for reporting and tracking.

Results show an increasingly healthy culture, a low threshold for reporting, and a decrease in higher-severity events. Between March 2011 and February 2014 a total of 6,260 conditions were reported. AHRQ-based Safety Culture surveys show continual improvement with 8 categories above national average. Response to conditions includes improved treatment techniques, safety checks, workflow, policies, procedures, and education.

An interdisciplinary incident reporting system is an effective tool for fostering a safety culture. By investigating lower level events in a non-punitive yet just manner, proactive actions can be taken contributing to a reduction in higher-severity events and increased employee engagement and ownership.

#034 Updates: Legislative, Regulatory, Payors and Industry Impact on Reimbursement for Radiation Oncology
Speaker: James E. Hugh, III MHA CHBME

A thorough understanding of current and future legislative, regulatory and payor changes and proposals is of paramount importance for healthcare providers, both clinical and administrative. Effective knowledge and implementation of rules these regulations and policies will ensure providers are compliant in an often complicated political environment. Federal state and local laws are changing so fast that our societies cannot keep up with new laws. Providers have a better opportunity of securing appropriate revenue when they are aware of current and future regulatory changes to assist in decision making and predictive analysis of trends and future changes.

This session will focus on current and future coding for compliance, appropriate documentation, influences of third party payer policies and regulations including a review of expected regulatory changes for 2015 and beyond.

9:30AM-10:00AM Breaks/Exhibits
9:45AM-10:45AM #035 High Fidelity Simulation: The path to progress in radiation oncology education
Speaker: Robert Amdur, MD
UF Department of Radiation Oncology

Robert Amdur, the Rodney R. Million Professor of Radiation Oncology in the UF department of radiation oncology and director of the department's residency program, specializes in radiation therapy for the treatment of brain, gynecologic, head and neck, thyroid, skin and spine cancers. He is a passionate medical educator and physician, as well as an extensively published researcher with nearly 170 peer-reviewed papers and three medical textbooks under his name. He serves as the director of a major section of the American Board of Radiology certification examination, and as the director of physician education for RadOnc eLearning, LLC.

10:45AM-11:15AM Break/Exhibits/Vendor Drawing- must be present to win!
11:15AM-12:45PM #036 ASTRO Update
Speakers: David C. Beyer, MD and William F. Hartsell, MD

Radical reform is taking place throughout the entire health care system. Within radiation oncology there are many forces that challenge the status quo and our
ability to run our departments and practices. This session will focus on those changes that are certain, those that are anticipated, and those that are possible. Specifically the changes in reimbursement proposed for 2015 for both hospital and freestanding centers will be explained. Many significant changes in CPT coding for radiation oncology will be going into effect in 2015 and these will be unveiled and discussed in detail to allow administrators and physicians to plan and prepare. Changes in quality measures as they apply to radiation oncology will be addressed as will new ASTRO programs designed to enhance patient safety, despite increasingly complex therapies. Other reform initiatives and trends that may impact long term reimbursements will be discussed.

12:45PM-1:00PM  Closing Remarks & Complimentary Registration Drawing (2015 Annual Meeting)
Adjournment – 2014 Annual Meeting

Noon-3:00PM  Exhibits Breakdown

1:00PM-3:00PM  Board of Directors Meeting (Board of Directors and Invited Guests)